

- The MONTH with the EDITOR -

Notes, reflections, comment upon medical and health news in both the scientific and public press, briefs of sorts from here, there and everywhere.

Headlines in many newspapers announce that over \$135,000,000 in charity service is given annually by the doctors of the United States.

In addition to this, doctors are criticized who fail to contribute liberally in funds used by uplifters to promote their pet projects.

For shame!

There's plenty of time—Personally we do all our dieting tomorrow—we're always too hungry today for any such nonsense.

"I doubt if it be possible," wrote Thomas R. Marshall about doctors, "for the pen of man really to embalm in words the trials and incidents of such a life. Indeed, it would be almost a useless task to undertake the writing of it, for it is not worth while for one to read that which he cannot visualize with some of his own personal eyesight. . . . And yet, I think, if service is to be the true mark of greatness in a people, all these other wonders of a wondrous age and state must pale into insignificance beside the service and sacrifice of the country doctor."

If our speed maniacs must have human fodder for their depraved appetites why not people our "safety zones" (?) with some of the 2,000,000 lepers who are scattered over the earth?

Or do these murderers insist upon the blood of women and children as hors d'oeuvre?

According to the Public Press:

—Morris Fishbein devotes the fourth of his series of well-told stories about the progress of medical science, appearing regularly in the *Scientific American*, to serums, vaccines, surgery and the outlook for prolonging life through hygiene.

Fishbein has the knack of making interesting reading of the story of medical progress without making farce comedy of life's most serious problem; without making caricatures out of physicians and without making the pronoun "I" too obvious.

Too much of our alleged "health education" reads like the advertisement of a new cure by the I of medical fakery.

—Doctor Joseph Collins (*Dearborn Independent*, January 2, 1926), uses his exceedingly effective literary rapier on Sigmund Freud and his methods in the first of a series of three articles dealing with that cult.

The majority of physicians will find something useful to them in their work in these scholarly discussions by one who entertains while he edifies.

—"Just what can medicine accomplish biologically in relation to disease?" asks Raymond Pearl (*American Mercury*). "The only thing it can really do," continues the author, "is to aid the organism in its adaptive regulatory efforts. But it can do this in several important ways which it is worth while to list and briefly characterize.

"1. It may greatly reduce (theoretically even to zero) deleterious agents which by their invasion of the organism upset its normal balance. Here lies the chief field of preventive medicine and sanitation, and here are to be mentioned such great triumphs as the imminent disappearance of yellow fever from the face of the earth, of malaria from civilized urban communities, etc.

"2. It can aid the organism *directly* in its regulatory efforts, by increasing the power of the specific adaptive mechanism against disease, as by injecting diphtheria

anti-toxin or anti-typhoid vaccine, or by the exhibition of such drugs as quinine in malaria, mercury or arsenic in syphilis, etc. In ways such as these the physician directly and literally saves lives.

"3. It can help *indirectly* to increase the adaptive powers of the organism by so guiding and directing the course of affairs as to bring to an optimum the internal and external conditions of life. Rest and forced feeding are of enormous aid to the body in its struggle with the tubercle bacillus. Neither the rest nor the food kills any germs, but they put the body in such condition that its own resources are developed to a maximum. In this field belong many of the great advances of therapy.

"4. It can alter the structure of the body by the removal or repair of worn out or damaged parts, thus clearing away often insuperable physical barriers to the successful adaptive regulation by the organism of its difficulties. The accomplishments of the modern surgeon furnish aid of a high order to the organism in distress. His activities, like those of the physician, listed in the second category above, sometimes literally and immediately save lives. * * *

"There is a fifth thing, and practically a very important one, that the wise physician does for his patients. He cheers them up, allays the fears grounded in folkways that go back to tree-dwelling days, and by improving their morale again clears the way for the *vis medicatrix naturae* to do its work."

—"A California farmer recently told his local school board: 'You haul my Jim to school in a heated bus and then you hire a physical education teacher to take him out and exercise him.'

"We have met with no better description of the paternalistic nonsense that wastes the taxpayers' money and ruins the taxpayers' children," says the *San Francisco Bulletin* in commenting upon this epigrammatic blow to paternalism.

—Sciosophy received another severe blow when a Superior Judge ruled that the California Chiropractic Board, created by an initiative law, lacked authority to pass upon the qualifications of chiropractic schools.

It seems that sciosophists are more successful in fooling sick people than they are in drafting laws.

—Professor Irving Fisher, "a Yale man and one of the founders of the Life Extension Institute," seems to be considerably exercised over the editorial published in the *Journal of the American Medical Association* about the article by W. E. Musgrave on "Social Movements for Prolonging Life." Fisher closes a letter to "Time" (January 4, 1926), with this:

"There is nothing which I have helped start in which I take greater pride than the Life Extension Institute, and I would gladly spend several thousand dollars out of my own pocket if thereby I could put in jail the man who is back of these misrepresentations."

Any member of the Institute's board of hygiene could tell Professor Fisher that such anger is calculated to raise blood pressure; his publicity directors could tell him that it is not good salesmanship and, most important of all, anger is not conducive to life extension.

—One tooth brush to each three persons (35 million) was sold in the United States last year. Allowing for the reasonable allotment of three brushes a year, it would seem that at most some 10 per cent of our people use tooth brushes.

Aside from the question of the health virtues of the tooth brush, the fact that all the active propaganda almost every agency of society could put forth induced only 10 per cent of the population to practice a cheap, simple

habit of cleanliness, makes one wonder about the effectiveness of much of the health education just now so popular.

—"Sometimes money speaks very precisely where words only speak vaguely," says an editorial (Scientific American) in reviewing an amusing incident chronicled by the Journal of the American Medical Association. "It seems," continues the editor, "that one of the insurance companies makes a special feature of insuring doctors—and other healers that are not regular doctors—against damage suits for malpractice. Thus it costs an M. D. \$12.50 a year to insure himself against such suits to the extent of \$5000. But it costs the practitioner who uses the E. R. A. (Electric Reactions of Abrams) methods \$50 to get the same protection.

"Now the insurance company is no stickler for sentiment and its rates are based on definite, past experience—nothing else; and certainly not on guesswork. In other words, they know pretty closely how great their 'risks' are. Twelve dollars and fifty cents against \$50 is four to one.

"Money does talk very plainly, sometimes!"

"The Doctor Looks at Biography": What a delightfully entertaining and informative book Doctor Joseph Collins has written under the above title. It is a logical sequence to his "The Doctor Looks at Literature," and promising of other good things from his pen already being forecasted by his magazine articles.

The talent is given to few physicians to successfully interpret to all who read, the applied truths of medical philosophy and facts as they should be understood by all people. Doctors like Collins, Raymond Pearl, Morris Fishbein and others are doing much toward maintaining the high standards set for medical literature by Oliver Wendell Holmes, Weir Mitchell and Sir William Osler.

Let's all go to Dallas. Why not get up a special train, leaving San Francisco and picking up some extra coaches as it passes through Los Angeles, and go to the A. M. A. meeting, April 19-23, 1926, several hundred strong?

"There are just two kinds of people in the world—those that advance and those that hamper progress, the doers and the ditchers. Whatever the doers, in their enthusiasm, conceive and suggest, the ditchers are bound to oppose and to wreck, if they can. The majority of us are simply neuters in this war of progress; our indifference is the battleground for the doers and the ditchers."—Editorial, Medical Standard.

Several correspondents ask if we cannot do something about the cheap cocktails disguised as patent medicines that are sold over the drug counters and advertised extensively in some newspapers.

One doctor tells of an instance of alcoholic neuritis contracted by a patient from taking a female weakness cure; another points out that newspapers are not allowed to advertise good liquor but they do advertise alcoholic preparations with a medical name.

What can we do about it? *Nothing.*

California, Nevada and Utah Doctors Publish Elsewhere:

—Franklin R. Nuzum, Santa Barbara, writes on "Pelagra Associated with Carcinoma of Ileum," Journal of the American Medical Association, December 12, 1925.

—Frank Hinman, San Francisco, and Alexander B. Hepler, Seattle, "Experimental Hydronephrosis: The Effect of Changes in Blood Pressure and in Blood Flow on Its Rate of Development, and the Significance of the Venous Collateral System. III. Partial Obstruction of the Renal Vein Without and With Ligation of all Collateral Veins," in the Archives of Surgery, December, 1925.

—Frank E. Blaisdell, Sr., San Francisco, "the Osteogenic Function of the Periosteum," in the Archives of Surgery, December, 1925.

—Thomas E. Gibson, San Francisco, and Adolph A. Kutzmann, Los Angeles, "Malignant Tumors of the

Testicle, a Pathological Study," in the Annals of Surgery, October, 1925.

—Adolph A. Kutzmann, Los Angeles, "Non-Parasitic Chyluria," in the Annals of Surgery, November, 1925.

—Harry S. Fist, Los Angeles, "Maternity Clinic of Los Angeles Helps Poor Women," in the Nation's Health, November, 1925.

—William Happ, Los Angeles, "The Teaching of Nutrition in the Public Schools," in the American Physical Education Review, October, 1925.

—Douglass W. Montgomery and George D. Culver, "Paraffinoma," Journal of the American Medical Association, January 9, 1926.

—Lionel P. Player and Francis H. Redewill, San Francisco, "Autonephrectomy: Animal Experimentation, with report of an Unusual Case," in the Journal of the American Medical Association, January 2, 1926.

—Albert H. Rowe, Oakland, Calif., "The Treatment of Bronchial Asthma," in the Journal of the American Medical Association, June 20, 1925.

—John William Shuman, Los Angeles, writes on "Southern California as a Rendezvous," in the Medical Herald and Physiotherapist, January, 1926.

The Use of High Carbohydrate Diets in the Treatment of Diabetes Mellitus—With the use of the high carbohydrate diets, W. D. Sansum, N. R. Blatherwick and Ruth Bowden, Santa Barbara, California (Journal A. M. A.), have found no difficulty in keeping patients sugar free and with a normal blood sugar. The patients are restored to a more nearly normal state of physical and mental activity. They are freed from the slightest traces of the acetone type of acidosis. Potatoes, milk and fruits have made it possible to eliminate the acid-ash type of acidosis which the authors believe has been a cause of the high incidence of blood vessel disease. The diets are more palatable. The patients lose their craving for forbidden foods, especially for the carbohydrates. A somewhat lower caloric intake is apparently required for full maintenance. These diets are cheaper, because they contain no special foods and much less of the expensive fats, such as cream, butter and olive oil. Theoretically, at least, and because of the entire freedom from acidosis, such diets should afford the patients the best opportunity for partial recovery. Except for the omission of sugar and of foods actually sweetened with sugar, these diets are essentially normal, containing white bread, potatoes, milk and large servings of fruit. With some diets even sucrose has been included. Whereas former diets contained in addition to adequate protein, as high as from 2 to 2.5 gm. of fat to each gram of carbohydrate, these new diets contain 2 or more grams of carbohydrate to each gram of fat. The routine treatment of diabetes with the high carbohydrate diets does not differ in any way from the usually accepted methods, except that more insulin is required. As a routine the total amount of food is divided into equal amounts for each of the three meals of the day. Two doses of insulin are used, five-eighths of the total dose being given from fifteen to thirty minutes before breakfast, and three-eighths at the same interval before supper, with minor variations as necessary. When the insulin dosage is small, one dose may be given daily with two large meals following the insulin, and no insulin before the smallest meal. The acidosis diet consists of 90 gm. of oatmeal (dry weight), 300 cc. of skim milk and 1000 cc. of fruit juice. The oatmeal and skim milk are divided into three meals, and the fruit juice is given both with and between meals. In general, orange juice seems to be the most suitable, and often, especially if there is a tendency toward nausea and vomiting, lemon juice or grapefruit juice is mixed with the orange juice. Ample insulin is given, but no attempt is made to render the patient sugar-free on the acidosis diet. The patient is desugarized on a low diet. A typical diet as served consists of carbohydrate, 217; protein, 93; fat, 107; calories, 2203. The foods used are vegetables (including potatoes), eggs, bacon, lean meat, butter, bread, cream, fruit, dry cereal and whole milk.